3/14/25, 1:15 PM Oregon Tilth Inc - Form 990 - Nonprofit Explorer - ProPublica efile Public Visual Render ObjectId: 202403189349306400 - Submission: 2024-11-13 TIN: 94-3029559 OMB No. 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Open to Public Go to www.irs.gov/Form990 for instructions and the latest information. Department of the Treasury Inspection Internal Revenue Service For the 2023 calendar year, or tax year beginning 01-01-2023 , and ending 12-31-2023 C Name of organization D Employer identification number B Check if applicable: Oregon Tilth Inc O Address change 94-3029559 O Name change Doing business as O Initial return O Final return/terminate E Telephone number ☐ Amended return Number and street (or P.O. box if mail is not delivered to street address) Room/suite PO Box 368 O Application pending (503) 378-0690 City or town, state or province, country, and ZIP or foreign postal code Corvallis, OR 97339 G Gross receipts \$ 11,616,565 H(a) Is this a group return for CHRIS SCHREINER ☐Yes ✓No subordinates? PO Box 368 H(b) Are all subordinates Corvallis, OR 97339 ☐ Yes ☐No included? Tax-exempt status: 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or If "No," attach a list. See instructions. H(c) Group exemption number Website: WWW.TILTH.ORG L Year of formation: 1986  ${f M}$  State of legal domicile: OR K Form of organization: ✓ Corporation ☐ Trust ☐ Association ☐ Other Summarv 1 Briefly describe the organization's mission or most significant activities: TO SUPPORT AND PROMOTE BIOLOGICALLY SOUND AND SOCIALLY EQUITABLE AGRICULTURE THROUGH EDUCATION, RESEARCH, ADVOCACY AND CERTIFICATION. Activities & Governance Check this box Number of voting members of the governing body (Part VI, line 1a) . . . 3 9 4 Number of independent voting members of the governing body (Part VI, line 1b) . 4 9 Total number of individuals employed in calendar year 2023 (Part V, line 2a) . 5 130 Total number of volunteers (estimate if necessary) . . . 6 9 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 . 7a **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 . 7b **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 50,877 79,123 Revenue **9** Program service revenue (Part VIII, line 2g) . . . 9.999.880 11,286,378 **10** Investment income (Part VIII, column (A), lines 3, 4, and 7d ) . . . 215.428 208,831 5,517 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 42,233 10,271,702 11.616.565 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1–3 ) . . . 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . . . 0 8,208,636 9,671,840 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Expenses **16a** Professional fundraising fees (Part IX, column (A), line 11e) . . 0 **b** Total fundraising expenses (Part IX, column (D), line 25) 0 2,959,027 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . . 2,233,050 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 10,441,686 12,630,867 **19** Revenue less expenses. Subtract line 18 from line 12 . . . -169,984 -1,014,302 Net Assets or Fund Balances Beginning of Current Year 13,114,625 12,544,371 20 Total assets (Part X, line 16) . . 21 Total liabilities (Part X, line 26) . . . . . 3,094,034 3,557,031 9,450,337 22 Net assets or fund balances. Subtract line 21 from line 20 . 9,557,594 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2024-11-12 Sign Signature of officer Date CHRIS SCHREINER EXECUTIVE DIR Here

Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN Check V if P00432577 **Paid** self-employed Kern & Thompson LLC Firm's name Firm's EIN 93-1157146

Form **990** (2023)

) (Revenue \$

including grants of \$

10,766,274

Other program services (Describe in Schedule O.)

Total program service expenses

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Pai	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions. 🐒	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section $501(c)(4)$ , $501(c)(5)$ , or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D.</i> Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 🕙	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III </i>	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or $X$ , as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 📆	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🥵	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions.	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes,"</i> complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
		F	orm <b>99</b>	<b>0</b> (2023

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Part IV Checklist of Required Schedules (continued)

		$\vdash$		<del></del>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L</i> , Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L</i> ,Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>			No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M </i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N. Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
Pa	Statements Regarding Other IRS Filings and Tax Compliance			
-	Check if Schedule O contains a response or note to any line in this Part V	- 1	Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable   1a   33			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable . 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
		F	orm <b>99</b>	<b>0</b> (2023)
	Page 5 —			
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	Statements Regarding Other IRS Filings and Tax Compliance (continued)  Forter the number of employees reported on Form W-3. Transmittel of Wage and			
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	<u> </u>
	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3a 3b		No
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	3D 4a	Yes	<u> </u>
ru	financial account in a foreign country (such as a bank account securities account or other financial account?)	−rd	165	I

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ь	If "Yes," enter the name of the foreign country:OC			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
_	If IIVes II had line For our Floridakha averaginsking file Forms 2000, TO	5c		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file			
d	Form 8282?	7c		No
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
y	required?	7g		No
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form			
	1098-C?	7h		No
_				
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
		0-		
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b			
1	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
	12b			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?			
a	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in			
-	which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess			
_	parachute payment(s) during the year?	15		No
	If "Yes," see the instructions and file Form 4720, Schedule N.			
6	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No
.7	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that			
,	would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			
		F	orm <b>99</b>	0 (202
	Page 6			
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	Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "N	o" recr	once to	ruge
ı al	lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI			<b>✓</b>
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year   1a   9			
1a	If there are material differences in voting rights among members of the governing			
1a	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or			
1a	If there are material differences in voting rights among members of the governing			

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2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	e.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
19	Own website Another's website Upon request Other (explain in Schedule O)  Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records: RENEE KEMPKA C/O ORGANIZATION CORVALLIS, OR 97333 (503) 378-0690			
		F	orm <b>99</b>	<b>0</b> (2023)
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Par	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Empand Independent Contractors	oloyee	es,	
	Check if Schedule O contains a response or note to any line in this Part VII			
	ction A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees			
1a Co year.	emplete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the	ne orga	nization	's tax
•	List all of the organization's <b>current</b> officers, directors, trustees (whether individuals or organizations), regardless of amo	unt		
	npensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.  ist all of the organization's <b>current</b> key employees, if any. See the instructions for definition of "key employee."			
	ist the organization's <b>current</b> highest compensated employees (other than an officer, director, trustee or key employ	ee)		
who r	eceived reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of mo	re than	n \$100,0	000 from

• List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the

the organization and any related organizations.

organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (F) (A) (E) Name and title Position (do not check more Reportable Reportable Average Estimated compensation hours per than one box, unless compensation amount of other week (list person is both an officer from the from related compensation organization (Wany hours and a director/trustee) organizations from the for related 2/1099-(W-2/1099organization and Former Officer Highest compensated employee Individual trustee MISC/1099organizations MISC/1099related Institutional ey employee director below dotted NEC) NEC) organizations Trustee 40.00 (1) LEONARD FREEMAN JR 173,955 18,159 MANAGING DIRECTOR 0.00 40.00 (2) CHRIS SCHREINER Х 172,266 16,324 Executive Dir. 0.00 40.00 (3) CONNIE KARR 159,246 23,129 CERTIFICATION DIR 0.00 40.00 (4) RENEE KEMPKA Х 170.07 12.126 DIRECTOR OF FIN 0.00 40.00 (5) KIMBERLY NELSON 140,982 17,250 CULTURE DIR 0.00 40.00 (6) KURT BELSER 104,514 20.413 INPECTION MANAGER 0.00 40.00 (7) HEATHER SMITH 100,736 19,500 IT DIRECTOR 0.00 40.00 (8) EDWARD JOHNSON 101.704 17.830 MARKETING DIRECTOR 0.00 3.00 (9) KIM GIBSON CLARK Х 0 President 0.00 1.00 (10) KELLEE JAMES х 0 Treasurer 0.00 1.00 (11) ROGER KUBALEK Χ Secretary 0.00 1.00 (12) TINIA PINA Х 0 0.00 1.00 (13) ANI KAME'ENUI n Director 0.00 1.00 (14) TINA COSENTINO Х 0.00 1.00 (15) GLENN WARD Director 0.00 1.00 (16) POPPY DAVIS 0.00 (17) ERIN SILVA 1.00 0 Director 0.00 Form **990** (2023) Page 8 -Form 990 (2023) Page 8 Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (A) Name and title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from the from related compensation

c Total from continuation sheets to Part VII, Section A	·	ally livuis	1 '	un eci	.01/1	เนอเ	eej		UI Yai iizatit		UI Yaliizatiolis ( W		
c Total from continuation sheets to Part VII, Section A . d Total (add lines 1b and 1c)		organizations below dotted	Individual trustae or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former				rela	ted
c Total from continuation sheets to Part VII, Section A . d Total (add lines 1b and 1c)													
c Total from continuation sheets to Part VII, Section A . d Total (add lines 1b and 1c)													
c Total from continuation sheets to Part VII, Section A . d Total (add lines 1b and 1c)													
c Total from continuation sheets to Part VII, Section A . d Total (add lines 1b and 1c)													
c Total from continuation sheets to Part VII, Section A . d Total (add lines 1b and 1c)													
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c Total from continuation sheets to Part VII, Section A . d Total (add lines 1b and 1c)													
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c Total from continuation sheets to Part VII, Section A . d Total (add lines 1b and 1c)													
c Total from continuation sheets to Part VII, Section A . d Total (add lines 1b and 1c)													
c Total from continuation sheets to Part VII, Section A . d Total (add lines 1b and 1c)													
d Total (add lines 1b and 1c)							ı						
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 9  Tyes No  Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		•						-	1,:	123,474			144,731
Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual				e liste	ed al	bove	e) who	rece	eived more t	han \$10	00,000		
line 1a? If "Yes," complete Schedule J for such individual												Yes	No
organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual				ee, ke	ey er	mplo •	yee, c	r hiç •	ghest compe	nsated • •	employee on	3	No
Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  Name and business address  (B)  Description of services  (C)  Compensation  2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0  Form 990 (2023)	organization and related organization										the	4 Yes	
Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  (B)  (C)  Compensation  Description of services  Compensation  Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0  Form 990 (2023)									-		vidual for	5	No
from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  Name and business address  Description of services  Compensation  Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0  Form 990 (2023)												l	
Name and business address  Description of services  Compensation  Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0  Form 990 (2023)												ensation	
compensation from the organization 0 Form <b>990</b> (2023)	Name a		ess							Desc			
compensation from the organization 0 Form <b>990</b> (2023)											•		
compensation from the organization 0 Form <b>990</b> (2023)													
compensation from the organization 0 Form <b>990</b> (2023)													
Form <b>990</b> (2023)		s (including but	t not lim	ited t	o the	ose	listed	abov	e) who rece	ived mo	re than \$100,000	of	
Page 9												Form 99	<b>00</b> (2023)
				_	Page	9							
(aum 000 (2022)	Farm 000 (2022)				-3-								
Page 9 Part VIII Statement of Revenue	Form 990 (2023)  Part VIII Statement of Revenue												Page 9
Check if Schedule O contains a response or note to any line in this Part VIII		a response or	note to	any li	ne ii	n th	is Part	VIII					
(A) (B) (C) (D) Total revenue exempt business excluded from function revenue tax under sections					Tota				Related exemp function	t 1	Unrelated business	Reve exclude tax under	nue d from sections
Federated campaigns 1a revenue 512 - 514	Federated campaigns 1a								revenu	е		512 -	514
Contributions,	Contributions,												
	Gifts, Grants, and Membership dues 1b  OtherAmt												
Similar AGOUNTS raising events 1c													

`	14	4	125	-	 			
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0	Related organizations		1d		<b>.</b>	- g	000 110p10	-/,p.o.o	
L	• Government grants (cont	ribution	ns) <b>1e</b>						
f	All other contributions, gi and similar amounts not i above	fts, gra included	nts,						
	79,123  Noncash contributions inclines 1a - 1f:\$		1g						
	<b>Total.</b> Add lines 1a-1f	• •			79,123	1			
	- CERTIFICATION				Business Code	10,309,314	10,309,314		
	2a CERTIFICATION				900099				
	, RESEARCH AND EDU	CATION	J		900099	977,064	977,064		
	90				•				
	RESEARCH AND EDUC								
	f All other program	servic	e revenue						
	9 Total. Add lines 2				11,286,378				
_	3 Investment income			nds, ii		, 			
	similar amounts) .	•		•		208,831			208,83
	4 Income from invest			pt bo	ond proceeds	0			
	<b>5</b> Royalties	<u>.</u>	(i) Rea		(ii) Personal				
	<b>6a</b> Gross rents	6a	(I) Rea		(II) Fersonal				
	<b>b</b> Less: rental	6b							
	expenses								
	c Rental income or (loss)	6с							
	<b>d</b> Net rental income	e or (lo	oss)			0			
	7-0	<u> </u>	(i) Securit	ies	(ii) Other				
	7a Gross amount from sales of assets other than inventory	7a							
	b Less: cost or other basis and sales expenses c Gain or (loss)	7b							
	sales expenses c Gain or (loss)	7c							
		٠				0			
7	d Net gain or (loss) Gross income from fu	ındraisi	ng events						
	(not including \$ contributions reported	d on lin	of ne 1c).						
	See Part IV, line 18			8a					
	<b>b</b> Less: direct expen	ises .		8b					
	<b>c</b> Net income or (los	ss) fro	m fundraisin	g eve	ents	0			
	<b>9a</b> Gross income from	gaming	n activities.						
	See Part IV, line 19			9a					
	<b>b</b> Less: direct expen			9b					
	<b>c</b> Net income or (los	ss) froi	m gaming a	ctiviti	es	0			
	10aGross sales of inverteurns and allowa			10a					
	<b>b</b> Less: cost of good	s sold		10b		†			
_	c Net income or (los	ss) fro	m sales of ir	vent	ory .	0			
					Business Code				
	11aOTHER INCOME				900099	42,233	42,233		
	b								
	ь								1

	1	i .	İ.	İ.	i .
Other Revenue Misc Amt					
d All other revenue					
e Total. Add lines 11a-11d					
		42,233			
12 Total revenue. See instructions					
i dan i dan see mandedons i i		11,616,565	11,328,611		208,831

Form **990** (2023)

	– Page 10 <del>––––</del>			
form 990 (2023)				Page
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must c	omplete all columns.	All other organization	ns must complete colu	umn (A).
Check if Schedule O contains a response or note to an	y line in this Part IX			$\square$
Do not include amounts reported on lines 6b, b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0			
2 Grants and other assistance to domestic individuals. See Part IV, line 22	0			
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	0			
<b>4</b> Benefits paid to or for members	0			
<b>5</b> Compensation of current officers, directors, trustees, and key employees	370,787	306,523	64,264	
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	7,415,041	6,124,471	1,290,570	
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	199,001	166,260	32,741	
<b>9</b> Other employee benefits	1,034,466	864,263	170,203	
O Payroll taxes	652,545	536,531	116,014	
1 Fees for services (non-employees):				
a Management	0			
<b>b</b> Legal	0			
<b>c</b> Accounting	37,612	31,703	5,909	
<b>d</b> Lobbying	0			
e Professional fundraising services. See Part IV, line 17	0			
<b>f</b> Investment management fees	0			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	153,985	103,293	50,692	
12 Advertising and promotion	99,479	83,851	15,628	
3 Office expenses	286,527	241,765	44,762	
4 Information technology	299,613	280,196	19,417	
5 Royalties	0			
L <b>6</b> Occupancy	15,176	13,332	1,844	
<b>7</b> Travel	17,414	14,246	3,168	
1.8 Payments of travel or entertainment expenses for any federal, state, or local public officials .	0			
9 Conferences, conventions, and meetings	92,311	79,559	12,752	
20 Interest	0			
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	19,146	16,138	3,008	
23 Insurance	88,880	74,917	13,963	
a PROGRAM SERVICE EXPENSE	1,420,089	1,420,089		
<b>b</b> ACCREDITATION FEES	136,231	136,231		
c CREDIT CARD FEES	115,421	115,421		
d STAFF & BOARD TRAINING	67,824	57,798	10,026	
All other expenses	100 210	00 697	0.622	-

2/1	14/25	1.1	1 =	
.7/	14//:)		1:)	

e All other expenses	102,312	22,001	7,032	
<b>Total functional expenses.</b> Add lines 1 through 24e	12,630,867	10,766,274	1,864,593	0
<b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720).				

Form **990** (2023)

Form 990 (2023)	Page <b>1</b> :

Part	Χ	Balance Sheet							
		Check if Schedule O contains a response or not	e to an	line in this Part IX					
		eneal in Schedule of Contains a response of not	e to un	Time in this care per	(A) Beginning of year		(B) End of year		
	1	Cash-non-interest-bearing			3,137,821	1	1,866,172		
	2	Savings and temporary cash investments		🟲	227,304	2	131,94		
	3	Pledges and grants receivable, net				3			
	4	Accounts receivable, net		🕇	1,942,272	4	686,97		
	5	Loans and other receivables from any current or trustee, key employee, creator or founder, subst controlled entity or family member of any of the	tantial	ontributor, or 35%		5	(		
	6	Loans and other receivables from other disqualit section $4958(f)(1)$ ), and persons described in section $4958(f)(1)$		6	(				
s	7	Notes and loans receivable, net				7			
ssets	8	Inventories for sale or use				8	(		
SS	9	Prepaid expenses and deferred charges		–	223,107	9	225,387		
-		Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	258,606	<u> </u>		·		
	b	Less: accumulated depreciation	10b	75,676	36,456	10c	182,930		
1	.1	Investments—publicly traded securities .			7,547,665	11	9,450,962		
1	2	Investments—other securities. See Part IV, line	11 .			12	(		
1	3	Investments—program-related. See Part IV, line			13	(			
1	4	Intangible assets	–		14	(			
1	.5	Other assets. See Part IV, line 11	🕇		15	(			
1	6	<b>Total assets.</b> Add lines 1 through 15 (must equ		<del> </del>	13,114,625	16	12,544,371		
	.7	Accounts payable and accrued expenses		670,772	17	1,001,921			
	.8	Grants payable	,	18	, ,				
	9	Deferred revenue	-	2,886,259	19	2,092,113			
	20	Tax-exempt bond liabilities	_	_,,,,_,,	20	_,,			
	21	Escrow or custodial account liability. Complete P	f Schedule D		21				
ĕ	22	Loans and other payables to any current or form employee, creator or founder, substantial contril or family member of any of these persons .							
9		, , ,			22				
2	23	Secured mortgages and notes payable to unrela		23					
2	4	Unsecured notes and loans payable to unrelated		24					
2	25	Other liabilities (including federal income tax, pa and other liabilities not included on lines 17 - 24 Complete Part X of Schedule D		to related third parties,		25			
2	26	<b>Total liabilities.</b> Add lines 17 through 25 .	3,557,031	26	3,094,034				
Balances	_	Organizations that follow FASB ASC 958, ch lines 27, 28, 32, and 33.	neck h	re  and complete	0.557.504		0.450.225		
Sala	7	Net assets without donor restrictions	•		9,557,594	27	9,450,337		
B 2	8	Net assets with donor restrictions				28			
r Fund		Organizations that do not follow FASB ASC complete lines 29 through 33.		neck here 🕨 🗌 and					
	9	Capital stock or trust principal, or current funds		29					
e	0	Paid-in or capital surplus, or land, building or eq	<u> </u>		30				
ASS 3	1	Retained earnings, endowment, accumulated inc	r other funds		31				
	2	Total net assets or fund balances	•		9,557,594	32	9,450,337		
Net 3	3	Total liabilities and net assets/fund balances .			13,114,625	33	12,544,37		

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Form 990 (2023) Page **12** 

**Reconcilliation of Net Assets** 

Ac	Retur	Return to Form			
orm	990 (2023)				
				OIIII <b>99</b>	• (2023
	audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b	orm 00	<b>0</b> (2023
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red	- Ju		.10
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Un Guidance, 2 C.F.R. Part 200, Subpart F?	iform	3a		No
	If the organization changed either its oversight process or selection process during the tax year, explain in Sched	dule O.			
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Yes	
	Separate basis Consolidated basis Both consolidated and separate basis				
	If `Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate tonsolidated basis, or both:	oasis,			
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed of separate basis, consolidated basis, or both:	n a			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
1	Accounting method used to prepare the Form 990:   Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.				
				Yes	No
ı a	Check if Schedule O contains a response or note to any line in this Part XII				
	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))  It XII Financial Statements and Reporting	10		9	,450,33
9	Other changes in net assets or fund balances (explain in Schedule O)	9 10		0	450.22
8	Prior period adjustments	8			
7	Investment expenses	7			
6	Donated services and use of facilities	6			
5	Net unrealized gains (losses) on investments	5	907,04		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	-1,014,30 9,557,59		
2	Total expenses (must equal Part IX, column (A), line 25)	3			,630,86
_					

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